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DESIGNATED GIFTS: To designate one or more charities or federated groups that appear on the list provided, fill in the charity or federation identification number(s) and annual dollar amounts here.

PAYROLL DEDUCTION AUTHORIZATION

I hereby authorize any agency of the United States Government by which I may be employed during 2003 to deduct the amount(s) shown above from my pay each pay period during the calendar year 2003 starting with the first pay period in January and ending with the last pay period that begins in December, and to pay the amounts so deducted to the Combined Federal Campaign shown above. I understand that this authorization may be revoked by me in writing at any time before it expires.

DATE.

COPY #1

CITY

My home e-mail address is: \_

OPM Form 1654 April 2002

PLEASE CHECK ONE BOX

I do want my name and address released to the voluntary organization(s) I have designated.

MY HOME ADDRESS IS: (My name will not be released unless this box is filled out completely.)

STATE\_

☐ I do want my home e-mail address released to the voluntary organization(s) I have designated.

☐ I do not want my name and address released to the voluntary organization(s) I have designated.

ZIP CODE.

SIGNATURE

TO THE CONTRIBUTOR'S PAYROLL OFFICE